Printed/Typed Name

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Ite Printed/Typed Name

Signature

Yellow:

HEALTH AND DO NOT WRITE BELOW THIS LINE. MENTAL AFFAIRS

JUN 2 7 2002

TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS. (Generators who submit hazardous waste for transport out-of-state produce completed copy of this copy and send to DTSC within 30 days.)

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